

PART B - ISSUE FEE TRANSMITTAL

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 5 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advanced orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

1. CORRESPONDENCE ADDRESS		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
 ROBERT H. WHISKER PITNEY BOWES INC. WORLD HEADQUARTERS STAMFORD, CT 06926-0700		INVENTOR'S NAME <hr/> Street Address <hr/> City, State and ZIP Code <hr/> CO-INVENTOR'S NAME <hr/> Street Address <hr/> City, State and ZIP Code <hr/> <input type="checkbox"/> Check if additional changes are on reverse side	

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
077459,098	12/29/89	009	FRAHM, E	218 07/01
First Named Applicant		SILVERBERG, MORTON		

TITLE OF INVENTION COMBINED PRINTER AND FACSIMILE APPARATUS WHICH SCANS USING DIFFERENT SCAN RATES AND DOT SIZES (AS AMENDED)

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
2 0612	050-296,000	097	UTILITY	NO	\$1050.00	10/01

3. Further correspondence to be mailed to the following:		4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.	
Mr. Robert H. Whisker PITNEY BOWES INC. World Headquarters Elmcroft Road Stamford, CT 06926-0700		1 Robert H. Whisker 2 Melvin J. Scolnick 3 David E. Pitchenik	

DO NOT USE THIS SPACE

DS20120 09/24/91 07459058 16-1885 020 142 1,050.00CH
 DS20121 09/24/91 07459058 16-1885 020 501 15.00CH

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)		6a. The following fees are enclosed:	
(1) NAME OF ASSIGNEE:		<input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Advanced Order - # of Copies <u>10</u> <small>(Minimum of 1)</small>	
(2) ADDRESS: (City & State or Country)		6b. The following fees should be charged to:	
		<u>16-1885</u> DEPOSIT ACCOUNT NUMBER <u>16-1885</u> <small>(Enclose Part C)</small>	
(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION		<input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Advanced Order - # of Copies <u>10</u> <input type="checkbox"/> Any Deficiencies in Enclosed Fees <small>(Minimum of 1)</small>	

A. This application is NOT assigned.
 Assignment previously submitted to the Patent and Trademark Office.
 Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Signature of party in interest of record) Robert H. Whisker (Date) Sept 10, 91

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.